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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/	851,602		
Filing Date	5/9/01			
First Named Inventor				
Group Art Unit				
Examiner Name				_
Attorney Docket Number	06948	105024	CIR	

Washington, DC 20231	

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

As of September 9, 2002, I will be employed at the U.S. Patent & Trademark Office as a Patent Examiner. In compliance with 37 C.F.R. 10.10(c), which states that a practioner who is an employee of the Office cannot prosecute or aid in any manner in the prosecution of any patent application before the Office, I request to withdraw as an agent for the above identifed patent application.

1. 🔽 The	correspondence addi	ress is NOT affecte	d by this withdrawal.	CENTER dence to:	EIV 0 2
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This request is	enclosed in triplicate.				
Name	Josephine	You	ng		
Signature	monde	<u> </u>			
Date	September 3, 26	502			
NOTE: Withdra	awal is effective when ap	oproved rather than w	hen received.		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.